

Attorney's Docket No. 12740-00002

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Nursing Bottle.

the specification of which:

(check one)

☒ [X] is attached hereto
☐ [] was filed on _____ as Application Serial No. _____, and
was amended on _____.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

**EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED WITHIN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION**

Priority Claimed

_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> [] Yes	<input type="checkbox"/> [] No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> [] Yes	<input type="checkbox"/> [] No

ALL FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS
6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION

(Number)

(Country)

(Day/Month/Year Filed)

CLAIM FOR BENEFIT OF EARLIER U.S. APPLICATION(S)
UNDER 35 U.S.C. 120

(complete this part only if this is a divisional,
continuation or CIP application)


I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT International filing date of this application:

<u>08/511,590</u>	<u>08/04/95</u>	<u>Pending</u>
(Serial No.)	(Filing Date)	(Status: patented, pending, abandoned)

(Serial No.)	(Filing Date)	(Status: patented, pending, abandoned)
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POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorneys to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

 Bryan K. Wheelock (31,441)
John S. Beulick (33,338)
Lisa A. Fahien (38,875)

Send Correspondence To:

Direct Telephone Calls To:

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& DAVIS
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St. Louis, Missouri 63102-2740

Bryan K. Wheelock
(314) 621-5070

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application and any patent issued thereon.

1-00 Full name of sole or first inventor Craig E. Brown ✓

Inventor's signature Craig E. Brown

Date 1/16/96

Residence Mt. Zion, Illinois

IL Citizenship U.S.A.

Post Office address 623 Antler Drive

Mt. Zion, Illinois 62549

2-00 Full name of second inventor Robert J. Brown ✓

Inventor's signature Robert J. Brown

Date 1/16/96

Residence Bonne Terre, Missouri, U.S.A.

Citizenship U.S.A.

Post Office address R. R. 1

Bonne Terre, Missouri 63628

3-00 Full name of third inventor Bernard J. Kemper ✓

Inventor's signature Bernard Kemper

Date 1-16-96

Residence Bonne Terre, Missouri

Citizenship U.S.A.

Post Office address P.O. Box 511

Bonne Terre, Missouri 63628

4-00 Full name of fourth inventor David E. Hays ✓

Inventor's signature David E. Hays

Date 1-16-96

Residence Desloge, Missouri, U.S.A.

Citizenship U.S.A.

Post Office address 104 S. Harding

Desloge, Missouri 63601



PATENT
Express Mail EM191535836US
OR/589117

Attorney's Docket No. 12740-00002

Applicant or Patentee: Brown et al.

Serial or Patent No.: _____

Filed or Issued: _____

For: Nursing Bottle

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) and 1.27(c)) - SMALL BUSINESS CONCERN**

I hereby declare that I am

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on
behalf of the concern identified below:

NAME OF CONCERN NEW VENT DESIGNS, INC.

ADDRESS OF CONCERN 623 ANTLER DRIVE

MT. ZION, ILLINOIS 62549

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled Nursing Bottle by inventor(s) Craig E. Brown, Robert J. Brown, Bernard J. Kemper and David E. Hays described in

- ☒ the specification filed herewith
☐ application serial no. _____, filed _____.
☐ patent no. _____, issued _____.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

*NOTE: Separate verified statements are required for each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

FULL NAME _____
ADDRESS _____

☐ Individual
Concern

☐ Small Business
Organization

☐ Nonprofit

FULL NAME _____
ADDRESS _____

☐ Individual
Concern

☐ Small Business
Organization

☐ Nonprofit

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Craig E. Brown
TITLE OF PERSON OTHER THAN OWNER President
ADDRESS OF PERSON SIGNING 623 Antler Drive
Mt. Zion, Illinois 62549

SIGNATURE *Craig E. Brown* DATE 1/16/96